

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) EDUCATORS FOR OHIO		FEC IDENTIFICATION NUMBER ▼ C C00624056	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee The New Media Firm		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 12 / 2016	
Mailing Address 1730 Rhode Island Ave NW #213		Amount 13332.00	
City Washington	State DC	Zip Code 20036	Transaction ID : WFT20169142224-1
Purpose of Expenditure Estimated Digital Ad Placement- Military		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2016
Name of Federal Candidate Donald, Trump, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee The New Media Firm		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 12 / 2016	
Mailing Address 1730 Rhode Island Ave NW #213		Amount 6666.00	
City Washington	State DC	Zip Code 20036	Transaction ID : WFT20169142226-1
Purpose of Expenditure Estimated Digital Ad Placement- Bully		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2016
Name of Federal Candidate Donald, Trump, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	19998.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gary, Allen, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 14 / 2016

Signature